PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003												-1
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY	
TC	OTAL CLAIMS		2-1			• •	RAT	E	FEE] [RATE	FEE
FOR			NUMBER FILED		NUME	NUMBER EXTRA		FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			27 minus 20=		*	* 7		=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		* /	* 1		=		OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM PR	RESENT					=		OR	+290=	-
* If the difference in column 1 is less than zero, enter "0" in						olumn 2	TOTA			OR	TOTAL	
	С		, •	·- L] 🗸	OTHER	THAN				
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							L EI	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	-		OR	X\$18=	
	Independent	*	Minus	***		=	X43=	T		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145:	_		OR	+290=	
			TOT			OB	TOTAL					
		(Calumn 2)	ADDIT. F			OR,	ADDIT. FEE					
AMENDMENT B		(Column 1) CLAIMS		(Colum	EST	(Column 3)		- 	ADDI-	1		ADDI-
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	DUSLY	PRESENT EXTRA	RATE		IONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
AME	Independent	*	Minus	***		=	X43=	T		OR	X86=	
	FIRST PRESE		+145=	_			+290=					
·								AL		OR	+290= TOTAL	
			ADDIT. FE			OR ,	ADDIT. FEE					
		(Column 1) CLAIMS		(Colum		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO	BER OUSLY	PRESENT EXTRA	RATE	TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
WE	Independent	<u> </u>	Minus	***		=	X43=	+			X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290=	
** [1	f the "Highest Nun	mn T is less than the mber Previously Pai mber Previously Pai	id For IN THIS	S SPACE is	less than	n 20, enter "20."	ADDIT. FE		<u> </u>	OR A	TOTAL ADDIT. FEE	
		ber Previously Paid					ound in the	appro	priate box	in colu	ımn 1.	